PERMIT APPLICATION Office Use Only TOWN OF ISLIP BUILDING DIVISION 0500-Building ____ 1 Manitton Court, Islip, NY 11751 Address _____ Parking Lot _____ Post Office Fireplace _____ Front Foot PERMIT(S) REQUESTED (Check one or more) Receipt # Apron _____ Numbers refer to questions on right Base Fee _____ ☐ Building Permit (must be issued before work starts) Recreation FINAL SURVEY REQ'D FOR CO Review Eng. Insp. Fee ☐ Commercial ☐ Industrial ☐ Residential Contr. Comm. Fee _____ Yes No ☐ Main Building ☐ Addition 1-4, 6, 8-10, 11 TOTAL FEE ☐ Accessory Building ☐ Addition 1-4, 6-8, 11 ZONING _____ APPROVED ____ DATE ___ ☐ Interior Alteration 1-4, 8-10, 11 APPROVED TO ISSUE DATE ☐ Interior Arrangement 1-4, 6, 8-10, 11 SPECIAL CONDITIONS OF PERMIT ☐ Fire Damage Repair 1-4, 6, 8-10, 11 ☐ Fireplace/Wood Coal Stove 3, 9, 10, 11 For a swimming pool, please fill out specialized FLOOR AREA to be constructed or altered application form instead. __total square feet LL UL GAR DECK Basement Finished Unfinished Porch ☐ Change of Use/Occupancy 1-4, 6, 7, 9,10, 11 ☐ Demolition (valid only 4 months) 1-3, 9, 11 ☐ Parking Lot/Dewatering/Retaining Wall 1-3, 7, Percent of Lot occupied: ☐ Revision of Issued permit 1-9, 10, 11 ☐ Truss Sign \$50 ☐ Other: DATE FILED _____ DATE ISSUED ____ ____ # of Existing Bedrooms By: _____ Expires ____ ____ # of Proposed Bedrooms A permit shall expire one (1) year after the date of issuance. Upon payment of the # TOTAL BEDROOMS proper fees, a permit may be renewed, but not more than three one year renewals ____ Year Original DWLG Constructed may be granted. No renewals are allowed on pools or second story decks. PROPERTY OWNER - Tel. SIZE & USE of existing structures ______ 2. PROPOSED USE 3. DESCRIPTION OF PROPOSED WORK PROPERTY ADDRESS - Tel. 4. FLOOR AREA to be constructed or altered of all floors excluding cellars and attic. Parking Lot Area Sq. Ft. 5. IF MASTER PLAN, Identify: 6. SETBACKS: Distance new structure to be from property line after construction (corner lots) Address _____ Other Front Yard ____ Other Front Yard ____ Rear Yard Side Yard _____ Other Side Yard ____ 7. SIZE of property () x (7. SIZE of property () x () = _____sq. ft. or _____8. HEIGHT of building from average grade to ridge _____ 9. PROPERTY LOCATION Post Office _____ CONTRACTOR - Tel. Street _____ Side of Street _ N _ S _ E _ W Nearest Cross Street ___ Direction from Cross St. _ N _ S _ E _ W Distance from cross St ____ # If an Corner TNIF _ CF ___ CV Name Distance from cross St. _____ft. If on Corner □ NE □ SE □ SW □ NW School District Address 10. Are there any Property Covenants or Condition of Special Permits which would affect **BOARD OF APPEALS** the development of this property? ______If yes, please attach. 11. Name of Filed Map GRANTED: Lot No. on Filed Map DENIED: **SECRETARY** I understand that before a building permit can be issued, adjoining street must meet minimum Town standards or be bonded for same and that a Certificate of Occupancy for work done under this permit will not be issued until road damage caused during construction is repaired or bonded for same. I understand that the Town is relying on the information provided herein, any inaccuracy may cause dely or additional fees. I swear that this application is a true and complete statement of all proposed work on the described premises, that I have in effect all required insurance, including workers compensation insurance, and that I presently possess a valid Suffolk County home improvement license, if applicable. *This permit issuance expressly implies approval by the landowner of inspections required of the premises. (Signature of Property Owner) (Signature of Contractor) County Home Improvement License#__ Sworn to before me this ____ day ____of 200 Sworn to before me this _____day ____ of 200_

Notary Public Signature

Notary Public Signature